

Important ~~things~~ things to see-impressionistic.

- 1-Follow a doctor or a nurse for a day -Out of the clinic and into a home and a factory-
- 2- Educ^l of Non-psychiatric physician-Central Inst. for Advanced Training of Physicians (Moscow) Observe in a polyclinic-
- 3-Job placement by labor organization unit-how done?
- 4-Examinations of groups of population+IMPORTANT- Factories; ill patients on state and collective farms; war invalids
- 5-Families where patients are kept and paid for
- 6- Regional mental hospital
- 7- Emergency psychiatric center-(eight in Leningrad)
- 8-Resident Forest schools for children
- 9- Treatment of alcoholic -sobering up stations under Police-
- 10-Follow-up studies (by dispensaries) of patients residing in Moscow vicinity (check this)

FIELD:

In 1961, more than one billion patient visits at the out-patient insts. maintained by the Health Ministry-Source; Large Medical Encyclopedia-USE THIS SOURCE* In the same year, 88 million house calls-or average of about 5.5. outpatient visits and house calls for every person-

Medical services available to workers in industry-push these visits-Shop microdistrict physicians-how much psychiatry? He is supposed to reduce health hazards-mental health?

Larger plants-Medical-Sanitary Sections-In 1961, 1,063 such sections-90 percent in the RSFSR and the Ukraine- Visit one or more

In 1961, 918 hospitals with bed capacity of 125,000 in medical-sanitary sections -more than 37,000 medical staff positions-

FIELD-cont.

Dispensarization- systematic observation and examination of patients.

In 1961, more than 40 million given preventive examinations-most schoolz students-

Emergency Medical care-ambulances with Red Crosses-any psychiatric?

Hospital Beds-Psychiatric -BME-

1940- 82,000

1963 - 196,000

~~xxxxxx~~Neurological-10,000 in 1940 to 40,000 in 1963

Constant look out for children's health -In 1963, 319,000 pediatric beds and over 67,000 pediatricians-

After summer recess, comprehensive medical exam each year-

Mike Gorman

Place to Visit - sent to brother

Child Psychiatry and Juvenile Delinquency

Moscow Institute for the Protection of the Health of Children and
Adolescents

Division of Child Psychiatry - No. 1 Pediatric Ward of the Kasachenko
Municipal Clinical Neuropsychological Hospital (Moscow)

Leningrad Institute of Pediatrics (Professors Tur and Smirnova)

Child Psychiatry Training Centers - Kharkov, Sverdlovsk

Ministry of Education - Disciplinary Schools (two in Leningrad)

Serbsky Institute of Forensic Psychiatry - Moscow

Director of Youth Colonies - Ministry of Internal Affairs (Moscow)

Work Colonies for Chronic Patients - Under Ministry of Social ~~Affairs~~ ^{Welfare}
(like to visit several in different parts of Russia)

Hospitals for Juvenile Delinquents (under Ministry of Health) Anywhere

Institute of Psychiatry - under Academy of Medical Sciences - Moscow

Moscow
Leningrad

Kiev

Kharkov

{ Tiflis
Leningrad } Sukhumi -

Soviet Community Mental Health Services and Work Therapy: A Report
of Two Visits - Field and Aronson(visits in 1963 and 64)

The keystone is the outpatient clinic

Profound emphasis upon work(rather than occupational) therapy

Workshops at the Bekhterev in Leningrad- The patients in the workshops
all come from the COMMUNITY*-return to their homes in the evening-

Assigned to the workshops by the psychoneurological dispensaries of
Leningrad- which see the patients for personal therapy -altho dispensary
physicians come to the shops once a month-

Shops in the evening hours for depressives and alcoholics-

The principle of negative induction(Pavlov) Work reduces hallucinations,
delusions, etc. It competes with them

Second workshop -Dispensary of the Kiev District, Moscow

Psyc. work colonies-equiv. of long-term mental hospitals. have from
500 to 1,000 or more beds.

Part of the system of the Health Ministry(?) Directly subject to the city
health psychiatrist -located in his area-

Many home visits to the patient-

Many patients work at home-

"Mental Health Programming in the Soviet Union-Aronson and Field-1964

The psychoneurological clinic is equiv. of our mental health center-

Emphasizes continuity of care-Treatment in home or, if not possible,
small in-patient units (stationary) of 15 to 100 beds-These units
receiving centers for emergencies(in many cases)In U.S, jails

Day hospitals-started in Russia-

No social workers in Russia (visiting nurses do the job)

Great emphasis on PREVENTION- Health propaganda-

The Education of non-psychiatric personnel-run this down-Can be done
easily in over-all polyclinic-

No visits to any place outside of Moscow and Leningrad-Capitalize on this-

In 1956, 2,327 PN clinics

Three types of clinics-independent(purely psychiatric); administratively separate from the district polyclinic-also clinics serve as out-patient departments of mental hospitals.

~~lots~~ Lots of psychotics kept in home treatment

The labor union organization role in finding job for patient

Dispensarization- Frequent examinations of groups of the population-

Following four categories covered: Chronically and acutely ill patients; war invalids; workers in shops and plants where conditions are a hazard; and to ill patients in state and collective farms-

Chronicity now allow d to develop-hospital stays very short- In some instances, hospital will pay money to family of patient to keep him at home-

Average capacity-Soviet hospital-500 beds-

Types of hospitals-Inter-district (mezhrayonnaya) ~~small~~ small-in-patient component of NP clinic- Acute cases-If illness protracted, then:

The regional (oblastnaya) hospital -VISIT- Usually located on outskirts of town-broken up into specialized divisions-agitated; quiet; infectious diseases, a neurological division and a pediatric division

Isolation-restraint-said to have been abolished-

Quite a number of movies and concerts at hospitals-

1 physician for 27 patients- 1 for over 100 here in U.S.

Psychiatric colonies-work villages-Industrial enterprises and collective ~~farms~~ farms employ some patients from the colonies-Capacity of colonies- 300 to 500 patients-

The emergency psychiatric teams -eight such centers in Leningrad

Also resort sanatoria located in pleasant surroundings *need for rest and change of environment- This is reason why Soviets tend to hospitalize psychotics more than we do-conditioning

Lourie paper-rough notes:

Speciality training of child psychiatrists-began about 1930 at Moscow
Institute for the Protection of the Health of Children and
Adolescents (visit)

Division of Child Psychiatry-No 1. Pediatric ward of the Kasachenko
Municipal Clinical Neuropsychological Hospital -Moscow (visit)

Four other training centers reported-Moscow, Leningrad, Kharkov,
Sverdlovsk-

Post-graduate training for non-psychiatrists-p.4

Dean of Soviet Child Psychiatry-Professor Sukhareva-

Summer camps -resident Forest schools

The neurotic child-re-education-other children used to help him-p.10

Makarenko-Soviet educator-rehabilitated hundreds of homeless children
via group approaches and work programs in the post-war period-abolished
intelligence tests-see if still around-famous book-"Book for Parents"

Child development-from infancy-Leningrad Institute of Pediatrics

(prof. Tur and Dr. Smirnova) p.8- "Stimulizing"- Graduated conditioning-
Hardening program-

Tradition of Russian psychiatrist more French than German-orientation
that of the neurophysiologist (Henri Claude example)

~~xxxxx~~Neuropathologists more likely to treat neuroses-Psychiatrists
the psychoses-

Russia has more psychiatrists, but concentrated in highly urbanized
areas, as in U.S.

First day hospital opened in Moscow in 1933 (because of a shortage
of beds)

According to Soviet psychiatrists, primary mode of treatment combination
of re-education plus physiological, pharm. and sociological treatments

Main treatment methods:

Somatic: Insulin coma(Sakel method); prolonged sleep treatment induced
by a weak current, narcotherapy, electric shock (declining) and
pharmacotherapy (chlorpromazine -called aminasin)

DIRECTIVE PSYCHOTHERAPY: Autobiographical therapy-use narcotherapy
and hypnosis to recreate- What drugs for narcotherapy- Sodium Pentothal

Psychotherapy ideologically acceptable-It is according to Pavlov, (gent)
the second signal system in man in which verbal stimuli replace
physical stimuli in the conditioned-reflex arc

SOCIOLOGICAL THERAPIES-

Mark Field diary- Sobering-up stations for alcoholics- Under the
~~xxxxx~~Police -Asked Ministry of Health to see-no go-

"Ja ne ponimaiu"- I donot understand!

The Org. of Russian Psychiatry-Very Important-where do various Insts.
fall-Under what Ministry-

Ministry of Internal Affairs -^(two kinds-work or educ.) the juvenile colonies (reformatories)

Ministry of Education- Disciplinary schools (two in Leningrad)

Com missions for Providing Unmanageable Children with Work-started in
world war II-do they still exist?

Children in Moscow (some) sent to Serbsky Inst. of Forensic Psychiatry for
study-Visit-

See the Director of Youth Colonies in the Ministry of Internal Affairs-

Ministry of Social Security - ^{Crutson} The mentally defective

Rough Notes-Russian Trip

1-LEBENSÖHN: 10 day visit-Moscow and Leningrad-1958(Horsley Gantt)

Places visited: Univ of Moscow Med. School

Psychiatric Clinic of the First Moscow Medical Inst (Korsakov)

Leningrad: Institute of Physiology (Pavlov)

Institute of Experimental Medicine

Prolonged sleep- still done?

"Sovietx Psychiatry"- Joseph Wortis-1950-William & Wilkins, Baltimore

Zig could not visit a chronic psychiatric hospital(check itin. on this)

Soviet psychiatry not hospital-oriented-much more emphasis on clinic treatment-

2- KOLB -District psychoneurological dispensaries-focal point of treatment-precursors of our MH Centers? Also Soviet day hospitals-

He visited nine psychiatric insts. in Moscow and Leningrad-

Term "clinic" in Russ. is a specialized psychoneurological unit in a hospital setting-

Good description of dispensary operational units -microdistricts which serve from 16,000 to 35,000 people-Attached to them large industrial workshops-

Home visits-also visits to factories for case-finding or preventive action-Directive, supportive therapy(Ziferstein)

No clinical psychologists orx tests-All observers agree- give too shallow a picture

At Workshops, psychotic and defective persons mixed in with neurotics-
(Amsterdam)

Good follow-up of patients discharged from hospitals-nurse does this

The colonies or "extra-urbans"-handle many chronics-

Family care-families paid-how extensive?

Babayan-

In "uss. only one in 8 beds devoted to psychiatry- one psychiatric bed for 1,000 persons

Babayan refers to "hospitalism"-those left too long in psychiatric hospitals-

✓ Soviet treatment - "in the very thick of life"

Babayan uses term "clinics" in the way we do-

Can you follow a day patient to his home -see the milieu in which he lives-

How extensive is home visiting-foster care-

✓ Description of a psychiatric colony-p.34-agric. training-paid for their work-

LEBENSOMN- 1962-Amer. Journal of Psychotherapy:

Look at table on p.296-Work Colonies and Colonies for Mental Deficients come under Ministry of Social Affairs -

Hospitals for Juvenile Delinquentss (check Alts) come under Ministry of Health -

Important role of sanatoria- mainly in treatment of neuroses-

uss. psychiatrist tends to hospitalize neurotic- he can be reconultioned because they believe due to faulty environment-Change his environment and he will recover-

✓ Important book- Lydia Bogdanovitch "Zapiski Psychiatra" -(A Psychiatrist's Notebook) Is it in English-Mental Health Education and to improve attitude to public-

Tables on no of hosp. beds-no of psychiatrists -see p.298 -

3-notes-3

In Russ, three admissions per year for every NP bed - In U.S. -less than one admission for every NP bed-

According to Field, 2,200 dispensaries in 1959-all have NP divisions- There are also small inpatient services (a specialized section of the dispensary) 50 to 75 beds-It is intermediate point between psychiatric dispensary and mental hospital-

ZIFERSTEIN-APA paper-1966-

At the Bechterev Res. Inst. in Leningrad for 13 months-

Active intervention by therapist-

Good descriptions of directive attitude-use--"e can prescribe new work situations-manipulate entire environment-

Good anecdote of Soviet aversion to plumbing the negative unconscious-
p.444

Visits by members of the collective to the patient-constant ties-p.445

Importance of out-patient treatment- Dispensary psychiatrists spending two hours of 5½ hour working day in factories, workers' clubs, housing projects -Really psychiatric public health officers- Check working conditions-

MARK FIELD-Mental Illness in Soviet Society-1960

At least one-to-one ratio of personnel to patients-probably better-

Physician has 27 patients per care-In U.S., 103 in 1964 (but many in U.S. not psychiatrists-)

Most hospitals not large- One of largest-Kashchenko in Moscow -2,200^{3,000} beds (incl 240 pediatric beds plus 180-bed branch hospital outside city

limits (visit it)

Important point-Most NP clinics are part of district clinics-so close cooperation bet. general physicians and psychiatrists-

They have in-patient beds (really similar to psych. units in general hospts. in U.S.)

Early treatment and prevention heavily stressed- In NP clinic, child psychiatrist works closely with pediatrician, school physician, teacher and parents -

Neuroses related to "bad" environment-but how account for J.D., alcoholism, stealing by children of elite and privileged classes-

C. SCOTT MOSS -Psychologist-1966-World Congress of Psychology

Institute of Psychiatry-Moscow-Res. Inst-1500 beds hospital- (Min. of Health)
According to Dick Williams memo (get copy-June 23, 1966)? similar Insts. in Russ. -Specialized clinics attached to hospital-children, geriatrics, Institute of Psychiatry, Academy of Medical Sciences-One of 20 Insts. in the Academy, and has, as its base, 3,000-bed hospital

Studying schizo over life span-dispensaries currently involved in long range follow-up of patients residing in Moscow vicinity

Each District has specialized children's polyclinic-

Dispensaries provide services 9 AM to 8 PM six days a week-On evenings and week-ends, emergency services throughout Moscow by 10-12 psychiatrists with cars -

Inst. for Forensic Psychiatry- social deviancy, J.D. (worth a visit)

Russia's Children-Alts

Chapter 17-The Mentally ill Child-

Neuroses-Pavlovian theory-injuries of the organism-basic dysfunction of the cortical process of stimulation and inhibition (higher nerve cells)
Psychoses-result of post-infections-also brain damage and other forms of organicity- Facilities for children:

Day treatment Centers

Special disciplinary schools

Day sanatoria- (pre and early school ages)

Children's Depts. in mental hospitals -acute illness -connected with dispensaries-
When illness protracted, transferred to mental hospitals for the chronically ill- (colonies in rural areas)

class rooms constitute key part of mental hospitals for children-
Use of physical therapies to correct higher cortical activity-glandular therapy, drugs, (stimulating or tranquilizing, shock therapy, sleep)
In schizo, stimulation desired-so no sleep therapy-

J.D.

Juvenile Colonies-Under Ministry of Internal Affairs-

Two types-educational ~~xxx~~ or work- Work colony takes the more serious delinquent-

Key personnel in these colonies-unbringers-

See Alt - Chapter 16 on J.D. - Very good on punishments & re-education -